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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Jan 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$53658

(8)

Principal Place of Business 1132 NW 76 BLVD SUITE B-3 GAINESVILLE FL 32606		Mailing Address 1132 NW 76 BLVD SUITE 8-3			
			GAINESVILLE FL 32606-6749		
				3. Date Incorporated or Qualifie	· · · · · · · · · · · · · · · · · · ·
5	(f) -i	2a, Maiting Address		05/20/1991 4. FEI Number	01/26/1996 Applied For
Principal Place of Business		26. Mailing Adoress		NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.		Surte, Apt. #, etc.	144		CO 75 Additional
outof the t		27		5. Certificate of Status Desired	Fee Required
City & State	·	City & State		6. Election Campaign Financing	\$5.00 May Be
		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		for intangible tax under s. 199.032,
	25		30	Florida Statutes	Yes No
		Current Registered Agent	81 Name	10. Name and Address of New	Registered Agent
	ter, bruce t		81 Name		
	S.W. 18TH PLACE		82 Street Add	ress (P.O. Box Number is Not Acces	otable)
GAII	NESVILLE FL 32607		83		
			84 City		FL 85 Zip Code
1 Dureusel t	o All provisions of Sections	607 0502 and 607 1508. Florida Statute	s the above-named cor	noration submits this statement for the	ne purpose of changing its registered
office or re	egistered agent, or both, in t	607 0502 and 607 1508, Florida Statute no State of Florida Such change was an ne publigation of Society 883 0505, Florida	uthorized by the corpora	tion's board of directors. I hereby ac	cept the appointment as registered
agent Lar	m Łakt ijar with, a nd accept th	he obligations of Section 66, 0505, Flor	rida Statutes.		22
agona i ar	1 \ 1	$+$ \times \cdot \cdot \cdot	R11125 1	GLATRA	1-20-7
IGNATURE	1)	$T - T \cup C \cup C$	BRUCE 7	FLATER	1-25-97
IGNATURE	Specific types a sound one end reg	stored agent and little if amplicable (NOTE	BRUCE 1 Reg stered Agent signature requ 13.	red when reinstating)	1-25-11
IGNATURE	Specific types a sound one end reg	$T - T \cup C \cup C$	Registered Agent signature requ	red when reinstating)	7-23-// DATE
IGNATURE 2.	Specific types a sound one end reg	stered agent and little if arepticable (NOTE ERS AND DIRECTORS	Registered Agent signature requi	red when reinstating)	DATE FFICERS AND DIRECTORS IN 12
	OFFICE	stered agent and little if arepticable (NOTE ERS AND DIRECTORS	Registered Agent signature required 13.	red when reinstating)	DATE FFICERS AND DIRECTORS IN 12
IGNATURE 2. THE AME IREET ADDRESS	OFFICE P BRUCE T FLATER	stered agent and little if arepticable (NOTE ERS AND DIRECTORS	Registered Agent signature required 13. 1.1 TITLE 1.2 NAME	red when reinstating)	DATE FFICERS AND DIRECTORS IN 12
IGNATURE 2. THE AME IREET ADDRESS TY-ST-ZIP	OFFICE P BRUCE T FLATER 1132 NW 76 BLVD	stered agent and little if arepticable (NOTE ERS AND DIRECTORS	Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	red when reinstating)	DATE FFICERS AND DIRECTORS IN 12
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